

IN THE COUNTY COURT OF HINDS COUNTY, MISSISSIPPI  
FIRST JUDICIAL DISTRICT

JACKIE SWAN

PLAINTIFF

V.

CAUSE NO: 20-3794

COMCAST CORPORATION  
D/B/A XFINITY

DEFENDANT

**COMPLAINT FOR DAMAGES**

COMES NOW the Plaintiff, Jackie Swan, by and through counsel, and files this her Complaint for Damages against the Defendant, Comcast Corporation d/b/a Xfinity and Plaintiff would state unto the Honorable Court the following, to wit:

I.

The Plaintiff, Jackie Swan, is adult resident citizen of Byram, Hinds County, Mississippi whose address is 215 Riverbend Drive, Byram, Mississippi 39272.

II.

Defendant Comcast Corporation is a national corporation which provides a host of products and services to the general public including, but not limited to, internet, cable, and residential alarm services. It is headquartered in Philadelphia, Pennsylvania and doing business in Mississippi as Xfinity a subsidiary of Comcast Corporation: with a local office located at 5915 I-55 North Frontage Road, Jackson, Mississippi 39213. Comcast Corporation, doing business as Xfinity, can be served with process at CT Corporation System, 645 Lakeland East, Suite 101, Flowood,

**EXHIBIT**

**A**

Mississippi 39232.

### III.

During the spring of 2016, Plaintiff Swan was interested in and contacted Comcast Corporation (hereinafter “Comcast”) for cable and security services. Information was submitted to Plaintiff Swan electronically to her phone in order that she could choose an option for services based upon the cost. However, Plaintiff Swan was not granted any meaningful time to review all the terms of the installation and service agreement before signing via her initials. Therefore, any material terms of the agreement, beyond costs and the details of her purchase selected, were not seen.

### IV.

Before November 2, 2017, Plaintiff Swan noticed that she was having difficulty with her security cameras staying online. After contacting Comcast, a tech person was scheduled to visit within one (1) week later. However, on November 2, she was able to speak with a technical service representative who directed that she unplugged all the security devices from the outlet and then replug them. At first blush, Plaintiff Swan was reluctant to do so and actually expressed her discontent, but the representative insisted that this was a necessary step for repair. While following the instructions of the representative, Plaintiff Swan received an electrical

shock that caused, among other things, approximately six (6) months of muscle spasms.

V.

As a proximate cause of the negligent conduct and actions of the Defendant, Comcast, Plaintiff Jackie Swan sustained over \$45,000.00 in medical bills and sustained injuries to her shoulder (torn rotator cuff), neck, arm, and hand.

### **CAUSE OF ACTION**

#### **Simple and/or Gross Negligence**

Defendant Comcast had a duty to keep its customers reasonably hazard free and safe as to not to present a danger or hazard to the Plaintiff. Because Defendant breached this duty, among others, Comcast caused substantial damages to Plaintiff who now deserves to be compensated.


WHEREFORE, PREMISES CONSIDERED, Plaintiff prays that the Court upon reviewing the Complaint and having a hearing upon this matter will award compensatory damages to the Plaintiff in the amount of \$200,000.00. Plaintiff, further, prays for trial by jury and such other relief that is just and proper in the premises.

RESPECTFULLY SUBMITTED, this the 29<sup>th</sup> day of October, 2020.

JACKIE SWAN,

PLAINTIFF

BY:

A handwritten signature in black ink, appearing to read "Sanford Knott", written over a horizontal line.

SANFORD KNOTT, MSB # 8477  
ATTORNEY FOR PLAINTIFF

OF COUNSEL:

SANFORD KNOTT & ASSOCIATES, P. A.

Post Office Box 1208

Jackson, Mississippi 39215-1208

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Facsimile Number: (601) 355-2600



<b>COVER SHEET</b> - cv-03794 - Court Ident. Docket # 2-1 <b>Civil Case Filing Form</b> (To be completed by Attorney/Party Prior to Filing of Pleading)		Filed 10/29/2020 Page 1 of 1
Mississippi Supreme Court Administrative Office of Courts Form AOC/01 (Rev 2016)		This area to be completed by clerk Case Number if filed prior to 1/1/94
In the COUNTY _____ Court of <u>HINDS</u> County — <u>FIRST</u> Judicial District		Local Docket ID
<b>Origin of Suit (Place an "X" in one box only)</b> <input type="checkbox"/> Initial Filing <input type="checkbox"/> Reinstated <input type="checkbox"/> Foreign Judgment Enrolled <input type="checkbox"/> Transfer from Other court <input type="checkbox"/> Other <input type="checkbox"/> Remanded <input type="checkbox"/> Reopened <input type="checkbox"/> Joining Suit/Action <input type="checkbox"/> Appeal		
<b>Plaintiff - Party(ies) Initially Bringing Suit Should Be Entered First - Enter Additional Plaintiffs on Separate Form</b> Individual <u>Swan</u> Last Name <u>Jackie</u> First Name _____ Maiden Name, if applicable _____ M.I. _____ Jr/Sr/III/IV _____ Check ( x ) if Individual Plaintiff is acting in capacity as Executor(trix) or Administrator(trix) of an Estate, and enter style: Estate of _____ Check ( x ) if Individual Plaintiff is acting in capacity as Business Owner/Operator (d/b/a) or State Agency, and enter entity: D/B/A or Agency _____ Business _____ Enter legal name of business, corporation, partnership, agency - If Corporation, indicate the state where incorporated _____ Check ( x ) if Business Plaintiff is filing suit in the name of an entity other than the above, and enter below: D/B/A _____ Address of Plaintiff <u>215 Riverbend Drive, Byram, Mississippi 39272</u> Attorney (Name & Address) <u>Sanford E. Knott, 425 South State Street, Jackson, Mississippi</u> MS Bar No. <u>8477</u> Check ( x ) if Individual Filing Initial Pleading is NOT an attorney Signature of Individual Filing: <u>Sanford E. Knott</u>		
<b>Defendant - Name of Defendant - Enter Additional Defendants on Separate Form</b> Individual _____ Last Name _____ First Name _____ Maiden Name, if applicable _____ M.I. _____ Jr/Sr/III/IV _____ Check ( x ) if Individual Defendant is acting in capacity as Executor(trix) or Administrator(trix) of an Estate, and enter style: Estate of _____ Check ( x ) if Individual Defendant is acting in capacity as Business Owner/Operator (d/b/a) or State Agency, and enter entity: D/B/A or Agency _____ Business <u>Xfinity</u> Enter legal name of business, corporation, partnership, agency - If Corporation, indicate the state where incorporated _____ Check ( x ) if Business Defendant is acting in the name of an entity other than the above, and enter below: D/B/A _____ Attorney (Name & Address) - If Known _____ MS Bar No. _____		
Check ( x ) if child support is contemplated as an issue in this suit.* *If checked, please submit completed Child Support Information Sheet with this Cover Sheet <b>Nature of Suit (Place an "X" in one box only)</b>		
<b>Domestic Relations</b> <input type="checkbox"/> Child Custody/Visitation <input type="checkbox"/> Child Support <input type="checkbox"/> Contempt <input type="checkbox"/> Divorce: Fault <input type="checkbox"/> Divorce: Irreconcilable Diff. <input type="checkbox"/> Domestic Abuse <input type="checkbox"/> Emancipation <input type="checkbox"/> Modification <input type="checkbox"/> Paternity <input type="checkbox"/> Property Division <input type="checkbox"/> Separate Maintenance <input type="checkbox"/> Term. of Parental Rights-Chancery <input type="checkbox"/> UIFSA (eff 7/1/97; formerly URESA) <input type="checkbox"/> Other _____ <b>Appeals</b> <input type="checkbox"/> Administrative Agency <input type="checkbox"/> County Court <input type="checkbox"/> Hardship Petition (Driver License) <input type="checkbox"/> Justice Court <input type="checkbox"/> MS Dept Employment Security <input type="checkbox"/> Municipal Court <input type="checkbox"/> Other _____	<b>Business/Commercial</b> <input type="checkbox"/> Accounting (Business) <input type="checkbox"/> Business Dissolution <input type="checkbox"/> Debt Collection <input type="checkbox"/> Employment <input type="checkbox"/> Foreign Judgment <input type="checkbox"/> Garnishment <input type="checkbox"/> Replevin <input type="checkbox"/> Other _____ <b>Probate</b> <input type="checkbox"/> Accounting (Probate) <input type="checkbox"/> Birth Certificate Correction <input type="checkbox"/> Mental Health Commitment <input type="checkbox"/> Conservatorship <input type="checkbox"/> Guardianship <input type="checkbox"/> Heirship <input type="checkbox"/> Intestate Estate <input type="checkbox"/> Minor's Settlement <input type="checkbox"/> Muniment of Title <input type="checkbox"/> Name Change <input type="checkbox"/> Testate Estate <input type="checkbox"/> Will Contest <input type="checkbox"/> Alcohol/Drug Commitment (voluntary)	<input type="checkbox"/> Alcohol/Drug Commitment (voluntary) <input type="checkbox"/> Other _____ <b>Children/Minors - Non-Domestic</b> <input type="checkbox"/> Adoption - Contested <input type="checkbox"/> Adoption - Uncontested <input type="checkbox"/> Consent to Abortion <input type="checkbox"/> Minor Removal of Minority <input type="checkbox"/> Other _____ <b>Civil Rights</b> <input type="checkbox"/> Elections <input type="checkbox"/> Expungement <input type="checkbox"/> Habeas Corpus <input type="checkbox"/> Post Conviction Relief/Prisoner <input type="checkbox"/> Other _____ <b>Contract</b> <input type="checkbox"/> Breach of Contract <input type="checkbox"/> Installment Contract <input type="checkbox"/> Insurance <input type="checkbox"/> Specific Performance <input type="checkbox"/> Other _____ <b>Statutes/Rules</b> <input type="checkbox"/> Bond Validation <input type="checkbox"/> Civil Forfeiture <input type="checkbox"/> Declaratory Judgment <input type="checkbox"/> Injunction or Restraining Order <input type="checkbox"/> Other _____
<b>Real Property</b> <input type="checkbox"/> Adverse Possession <input type="checkbox"/> Ejectment <input type="checkbox"/> Eminent Domain <input type="checkbox"/> Eviction <input type="checkbox"/> Judicial Foreclosure <input type="checkbox"/> Lien Assertion <input type="checkbox"/> Partition <input type="checkbox"/> Tax Sale: Confirm/Cancel <input type="checkbox"/> Title Boundary or Easement <input type="checkbox"/> Other _____ <b>Torts</b> <input type="checkbox"/> Bad Faith <input type="checkbox"/> Fraud <input type="checkbox"/> Intentional Tort <input type="checkbox"/> Loss of Consortium <input type="checkbox"/> Malpractice - Legal <input type="checkbox"/> Malpractice - Medical <input type="checkbox"/> Mass Tort <input checked="" type="checkbox"/> Negligence - General <input type="checkbox"/> Negligence - Motor Vehicle <input type="checkbox"/> Premises Liability <input type="checkbox"/> Product Liability <input type="checkbox"/> Subrogation <input type="checkbox"/> Wrongful Death <input type="checkbox"/> Other _____		